

# Senate File 440 - Reprinted

SENATE FILE 440

BY COMMITTEE ON APPROPRIATIONS

(SUCCESSOR TO SF 415)

(SUCCESSOR TO SSB 1199)

(As Amended and Passed by the Senate April 16, 2013)

## A BILL FOR

1 An Act relating to human services involving mental health  
2 and disability services and children's services, making  
3 appropriations, and including effective dates.  
4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 DIVISION I  
2 SYSTEM REDESIGN — IMPLEMENTATION  
3 RESEARCH-BASED PRACTICE

4 Section 1. Section 331.388, Code 2013, is amended by adding  
5 the following new subsection:

6 NEW SUBSECTION. 4A. "*Research-based practice*" means a  
7 service or other support in which the efficacy of the service  
8 or other support is recognized as an evidence-based practice,  
9 or is deemed to be an emerging and promising practice, or which  
10 is part of a demonstration and will supply evidence as to the  
11 effectiveness of the service or other support.

12 Sec. 2. Section 331.393, subsection 4, paragraph g,  
13 unnumbered paragraph 1, Code 2013, is amended to read as  
14 follows:

15 The requirements for designation of targeted case management  
16 providers and for implementation of ~~evidence-based~~ models  
17 of case management that apply research-based practice. The  
18 requirements shall be designed to provide the person receiving  
19 the case management with a choice of providers, allow a  
20 service provider to be the case manager but prohibit the  
21 provider from referring a person receiving the case management  
22 only to services administered by the provider, and include  
23 other provisions to ensure compliance with but not exceed  
24 federal requirements for conflict-free case management. The  
25 qualifications of targeted case managers and other persons  
26 providing service coordination under the management plan shall  
27 be specified in the rules. The rules shall also include but  
28 are not limited to all of the following relating to targeted  
29 case management and service coordination services:

30 Sec. 3. Section 331.397, subsection 5, paragraph b, Code  
31 2013, is amended to read as follows:

32 b. Providing ~~evidence-based~~ services that apply  
33 research-based practice.

34 Sec. 4. Section 331.397, subsection 6, paragraph d, Code  
35 2013, is amended to read as follows:

1     *d.* Advances in the use of ~~evidence-based~~ treatment applying  
2 research-based practice, including but not limited to all of  
3 the following:

- 4     (1) Positive behavior support.  
5     (2) Assertive community treatment.  
6     (3) Peer self-help drop-in centers.

7     Sec. 5. Section 331.397, subsection 7, paragraphs b and c,  
8 Code 2013, are amended to read as follows:

9     *b.* The ~~efficacy of the services or other support is~~ are  
10 recognized as an ~~evidence-based~~ a research-based practice, ~~is~~  
11 ~~deemed to be an emerging and promising practice, or providing~~  
12 ~~the services is part of a demonstration and will supply~~  
13 ~~evidence as to the services' effectiveness.~~

14     *c.* A determination that the services or other support  
15 provides an effective alternative to existing services  
16 that have been shown by the ~~evidence~~ research base to be  
17 ineffective, to not yield the desired outcome, or to not  
18 support the principles outlined in *Olmstead v. L.C.*, 527 U.S.  
19 581 (1999).

20     COMMUNITY CORRECTIONS SYSTEM ACCESS TO REGIONAL SERVICES

21     Sec. 6. Section 331.395, Code 2013, is amended by adding the  
22 following new subsection:

23     NEW SUBSECTION. 5. If adequate funding is provided through  
24 a state appropriation made for purposes of paying for services  
25 authorized pursuant to this subsection, a person with an income  
26 within the level specified in subsection 1 who is housed by or  
27 supervised by a judicial district department of correctional  
28 services established under chapter 905 shall be deemed to  
29 have met the income and resource eligibility requirements for  
30 services under the regional service system.

31     ELIGIBILITY MAINTENANCE

32     Sec. 7. Section 331.396, subsection 1, paragraph b, Code  
33 2013, is amended to read as follows:

34     *b.* The person is at least eighteen years of age and is a  
35 resident of this state. However, a person who is seventeen

1 years of age, is a resident of this state, and is receiving  
2 publicly funded children's services may be considered eligible  
3 for services through the regional service system during the  
4 three-month period preceding the person's eighteenth birthday  
5 in order to provide a smooth transition from children's  
6 to adult services. In addition, a person who is less than  
7 eighteen years of age and a resident of this state may be  
8 eligible, as determined by the region, for those mental health  
9 services made available to all or a portion of the residents  
10 of the region of the same age and eligibility class under the  
11 county management plan of one or more counties of the region  
12 applicable prior to formation of the region.

13 Sec. 8. Section 331.396, subsection 2, paragraph b, Code  
14 2013, is amended to read as follows:

15 b. The person is at least eighteen years of age and is a  
16 resident of this state. However, a person who is seventeen  
17 years of age, is a resident of this state, and is receiving  
18 publicly funded children's services may be considered eligible  
19 for services through the regional service system during the  
20 three-month period preceding the person's eighteenth birthday  
21 in order to provide a smooth transition from children's  
22 to adult services. In addition, a person who is less than  
23 eighteen years of age and a resident of this state may be  
24 eligible, as determined by the region, for those intellectual  
25 disability services made available to all or a portion of the  
26 residents of the region of the same age and eligibility class  
27 under the county management plan of one or more counties of the  
28 region applicable prior to formation of the region.

29 Sec. 9. Section 331.397, subsection 2, paragraph b, Code  
30 2013, is amended to read as follows:

31 b. Until funding is designated for other service  
32 populations, eligibility for the service domains listed in this  
33 section shall be limited to such persons who are in need of  
34 mental health or intellectual disability services. However, if  
35 a county in a region was providing services to an individual

1 ~~person~~ eligibility class of persons with a developmental  
2 disability other than intellectual disability or a brain injury  
3 prior to formation of the region, the ~~individual-person class~~  
4 of persons shall remain eligible for the services provided when  
5 the region is formed, provided that funds are available to  
6 continue such services.

7 CORE SERVICES

8 Sec. 10. Section 331.397, subsection 4, paragraphs c and d,  
9 Code 2013, are amended to read as follows:

10 c. Support for community living and other living  
11 arrangements, including but not limited to all of the  
12 following:

- 13 (1) Home health aide.
- 14 (2) Home and vehicle modifications.
- 15 (3) Respite.
- 16 (4) Supportive community living.
- 17 (5) Residential care facility living arrangements.

18 d. Support for employment and work activity, including but  
19 not limited to all of the following:

- 20 (1) Day habilitation.
- 21 (2) Job development.
- 22 (3) Supported employment.
- 23 (4) Prevocational services.
- 24 (5) Other work activity services.

25 STATE PAYMENTS TO REGION

26 Sec. 11. Section 426B.3, subsection 4, as enacted by 2012  
27 Iowa Acts, chapter 1120, section 137, is amended to read as  
28 follows:

29 4. a. For the fiscal years beginning July 1, 2013, and  
30 July 1, 2014, a county with a county population expenditure  
31 target amount that exceeds the amount of the county's base year  
32 expenditures for mental health and disabilities services shall  
33 receive an equalization payment for the difference.

34 b. The equalization payments determined in accordance  
35 with this subsection shall be made by the department of human

1 services for each fiscal year as provided in appropriations  
 2 made from the property tax relief fund for this purpose. If  
 3 the county is part of a region that has been approved by the  
 4 department in accordance with section 331.389, to commence  
 5 partial or full operations, the county's equalization payment  
 6 shall be remitted to the region for expenditure as approved by  
 7 the region's governing board.

8 STRATEGIC PLAN REQUIREMENT FOR FY 2013-2014

9 Sec. 12. 2012 Iowa Acts, chapter 1128, section 8, is amended  
 10 to read as follows:

11 SEC. 8. COUNTY MENTAL HEALTH, ~~MENTAL RETARDATION~~  
 12 INTELLECTUAL DISABILITY, AND DEVELOPMENTAL DISABILITIES  
 13 SERVICES MANAGEMENT PLAN — STRATEGIC PLAN. Notwithstanding  
 14 section 331.439, subsection 1, paragraph "b", subparagraph (3),  
 15 counties are not required to submit a three-year strategic  
 16 plan by April 1, 2012, to the department of human services. A  
 17 county's strategic plan in effect as of the effective date of  
 18 this section shall remain in effect until the regional service  
 19 system management plan for the region to which the county  
 20 belongs is approved in accordance with section 331.393, subject  
 21 to modification before that date as necessary to conform with  
 22 statutory changes affecting the plan and any amendments to the  
 23 plan that are adopted in accordance with law.

24 RISK POOL DISTRIBUTIONS

25 Sec. 13. 2012 Iowa Acts, chapter 1128, section 6,  
 26 subsections 5 and 6, as amended by 2012 Iowa Acts, chapter  
 27 1133, section 67, are amended to read as follows:

28 5. If moneys from a distribution made under this section are  
 29 not expended by a county by June 30, ~~2013~~ 2015, for services  
 30 provided by that date under the applicable service management  
 31 plan, the county shall reimburse the unexpended moneys to the  
 32 department by August 30, ~~2013~~ 2015, and the moneys reimbursed  
 33 shall be credited to the risk pool in the property tax relief  
 34 fund.

35 6. The risk pool board shall submit annual reports to the

1 governor and general assembly on or before December 31, ~~2012~~  
 2 ~~and 2013~~, regarding the expenditure of funds distributed under  
 3 this section. The final annual report shall be submitted on or  
 4 before December 31, 2015.

5                   TRANSITION FUND — SERVICES MAINTENANCE

6       Sec. 14. TRANSITION FUND — SERVICES MAINTENANCE. A county  
 7 receiving an allocation of funding from the mental health and  
 8 disability services redesign transition fund created in 2012  
 9 Iowa Acts, chapter 1120, section 23, shall utilize the funding  
 10 received by the county as necessary for the services covered  
 11 in accordance with the county's approved management plan in  
 12 effect as of June 30, 2012, for the fiscal year beginning July  
 13 1, 2012, and ending June 30, 2013.

14                   REDESIGN EQUALIZATION PAYMENTS AND RISK POOL

15       Sec. 15. EQUALIZATION PAYMENTS AND RISK POOL.

16       1. There is transferred from the general fund of the state  
 17 to the property tax relief fund created in section 426B.1  
 18 for the fiscal year beginning July 1, 2012, and ending June  
 19 30, 2013, the following amount to be used for the purposes  
 20 designated:

21 ..... \$ 42,826,316

22       2. a. The moneys credited to the property tax relief  
 23 fund in accordance with this section are appropriated to the  
 24 department of human services for the fiscal year beginning July  
 25 1, 2013, and ending June 30, 2014, for distribution to counties  
 26 and regions in accordance with this section. If a county is  
 27 part of a region that has been approved by the department to  
 28 commence partial or full operations in accordance with section  
 29 331.389 for the fiscal year, the county's payment made pursuant  
 30 to this section shall be remitted to the region for expenditure  
 31 as approved by the region's governing board. The payments made  
 32 under this section are in lieu of equalization payments for the  
 33 fiscal year beginning July 1, 2013, otherwise required under  
 34 section 426B.3, as amended by 2012 Iowa Acts, section 137.

35       b. For the purposes of this section, unless the context

1 otherwise requires:

2 (1) "Net expenditures from the county's services fund"  
3 means a county's payments for non-Medicaid services, as  
4 reported to the department of management pursuant to section  
5 331.403, plus any reimbursement of moneys distributed to the  
6 county pursuant to 2012 Iowa Acts, chapter 1128, section 6, as  
7 amended by 2012 Iowa Acts, chapter 1133, section 67, and less  
8 any moneys expended by the county as a provider of services  
9 that were reimbursed to the county.

10 (2) "Population" means the same as defined in section  
11 331.388.

12 (3) "Services fund" means a county's mental health and  
13 disabilities services fund created in accordance with section  
14 331.424A.

15 3. Of the amount appropriated in this section, \$31,388,667  
16 shall be distributed to counties as per capita growth payments  
17 in accordance with this section.

18 4. A per capita growth amount shall be distributed to each  
19 county in two payments. The provisional per capita growth  
20 amount for the fiscal year is \$10.25, with the final amount  
21 determined in accordance with subsection 5. A county's first  
22 per capita growth payment shall be the product of \$8.25 of the  
23 provisional per capita growth amount times the county's general  
24 population for the fiscal year.

25 5. The moneys transferred to the property tax relief fund  
26 for the fiscal year beginning July 1, 2013, from the federal  
27 social services block grant pursuant to 2013 Iowa Acts, House  
28 File 614, or any other 2013 Iowa Acts, if enacted and from  
29 the federal temporary assistance for needy families block  
30 grant, totaling at least \$11,774,275, are appropriated to the  
31 department of human services for the fiscal year beginning July  
32 1, 2013, to be used for distribution of state payment program  
33 remittances to counties for the fiscal year in accordance  
34 with this subsection. The state payment program remittance  
35 shall be an amount equal to the amount paid to a county of



1 residence under the program for state case services known as  
2 the state payment program, implemented pursuant to section  
3 331.440, subsection 5, during the most recently available  
4 twelve-month period. The department shall draw upon the  
5 appropriation made from the general fund of the state for the  
6 medical assistance program for the fiscal year as necessary for  
7 cash flow purposes in order to comply with the date specified  
8 for remitting payments to counties in subsection 6, and to  
9 distribute at least the amount specified in this subsection.  
10 If the procedure for reduced federal funds specified in 2013  
11 Iowa Acts, House File 614, or any other 2013 Iowa Acts, if  
12 enacted, reduces the amount of block grant funding available  
13 for the purposes of this subsection, the amount drawn from the  
14 medical assistance appropriation shall be increased to replace  
15 the amount of the reduction.

16 6. The first per capita growth payment due a county under  
17 subsection 4 and any state payment program remittance due a  
18 county under subsection 5, shall be combined and remitted to  
19 the counties on or before July 15, 2013.

20 7. a. Of the amount appropriated in this section,  
21 \$11,437,649 shall be distributed to counties as stabilization  
22 payments in accordance with this subsection. A stabilization  
23 payment shall be distributed to each county for which the  
24 amount of net expenditures from the county's services fund  
25 under section 331.424A for the fiscal year beginning July 1,  
26 2012, exceeds the sum of the county's state payment program  
27 remittance under subsection 5 plus the dollar amount of the  
28 county's services fund levies for the fiscal year beginning  
29 July 1, 2013. A county's stabilization payment amount shall  
30 be equal to the excess net expenditures amount. To receive  
31 a stabilization payment, on or before December 1, 2013, the  
32 county shall submit a statement of net expenditures from  
33 the county's services fund for the fiscal year beginning  
34 July 1, 2012. The statement shall be accompanied by the  
35 annual financial report for that fiscal year submitted to the

1 department of management pursuant to section 331.403. The  
2 department shall determine the county's stabilization payment  
3 amount by subtracting the sum of the county's state payment  
4 program remittance and the dollar amount of the county's  
5 certified levy amount for the services fund for the fiscal year  
6 from the county's statement of total net expenditures.

7     b. If the sum of the total of all eligible counties'  
8 stabilization payments plus the product of \$2.00 of the  
9 provisional per capita growth payment amount under subsection  
10 4 times the state's general population for the fiscal year is  
11 greater or less than the amount of moneys remaining after the  
12 first per capita growth payments made pursuant to subsection  
13 4 and the amount allocated in this subsection, the department  
14 shall identify a final per capita growth amount by adjusting  
15 the provisional per capita growth amount as necessary to  
16 distribute all of the moneys remaining. If the total of the  
17 stabilization payments exceeds the amount allocated in this  
18 subsection, the provisional per capita growth amount shall be  
19 reduced to provide sufficient funding to address the excess.  
20 If the total of the stabilization payments is less than the  
21 amount allocated in this subsection, the provisional per  
22 capita growth amount shall be increased to address the reduced  
23 amount. A county's second per capita growth payment shall be  
24 the product of the remainder of the final per capita growth  
25 amount as adjusted by the department times the county's general  
26 population for the fiscal year.

27     c. Each county's second per capita growth payment shall be  
28 combined with any stabilization payment due the county. The  
29 payments shall be remitted to the counties on or before January  
30 2, 2014.

31                   SUBSTANCE-RELATED DISORDER DETOXIFICATION

32     Sec. 16. COORDINATION OF DETOXIFICATION SERVICES. The  
33 department of human services shall review options for the  
34 mental health and disability services regions to coordinate  
35 detoxification funding provided by counties and other such

1 disorder funding provided by counties in place of county  
2 coordination. The department shall report to the governor and  
3 general assembly its findings, options, and recommendations on  
4 or before October 15, 2013.

5 MEDICAID OBLIGATION COST SETTLEMENT

6 Sec. 17. COUNTY MEDICAL ASSISTANCE NONFEDERAL SHARE —  
7 COST SETTLEMENT. Any county obligation for payment to the  
8 department of human services of the nonfederal share of the  
9 cost of services provided under the medical assistance program  
10 prior to July 1, 2012, pursuant to sections 249A.12 and  
11 249A.26, shall remain at the amount agreed upon as of June 30,  
12 2013. Beginning July 1, 2013, other than a county payment on  
13 the obligation or for a charge when the county is the provider  
14 of the service, the department shall be responsible for any  
15 adjustment that would otherwise be applied to the amount of the  
16 county obligation after that date due to cost settlement of  
17 charges or other reasons.

18 COUNTY MENTAL HEALTH AND DISABILITY

19 SERVICES FUND — FY 2013-2014

20 Sec. 18. SERVICES FUND — MANAGEMENT PLAN. For the fiscal  
21 year beginning July 1, 2013, and ending June 30, 2014, the  
22 appropriations made by the county board of supervisors for  
23 payment for mental health and disability services pursuant  
24 to section 331.424A, subsection 3, as enacted by 2012 Iowa  
25 Acts, chapter 1120, section 132, shall be made in accordance  
26 with the county's service management plan approved under  
27 section 331.439, Code 2013, until the county management plan is  
28 replaced by a regional service system management plan approved  
29 under section 331.393.

30 Sec. 19. CONTINUATION OF MENTAL HEALTH AND DISABILITY  
31 SERVICES REDESIGN FISCAL VIABILITY STUDY COMMITTEE. The  
32 legislative council is requested to continue for the 2013  
33 legislative interim the mental health and disability services  
34 redesign fiscal viability study committee initially created by  
35 the legislative council in 2012. The legislative council is

1 requested to add at least four citizen members to the study  
 2 committee to provide representation for service consumers,  
 3 service providers, county supervisors, and the community  
 4 services affiliate of the Iowa state association of counties.  
 5 In addition to monitoring implementation of the mental health  
 6 and disability services redesign and receiving reports from  
 7 stakeholder groups engaged in implementation of the redesign,  
 8 the study committee shall be directed to propose a permanent  
 9 approach for state, county, and regional financing of the  
 10 redesign.

11 Sec. 20. EFFECTIVE UPON ENACTMENT. This division of this  
 12 Act, being deemed of immediate importance, takes effect upon  
 13 enactment.

14 DIVISION II

15 DATA AND STATISTICAL INFORMATION AND OUTCOME AND PERFORMANCE  
 16 MEASURES

17 Sec. 21. Section 225C.4, subsection 1, paragraph j, Code  
 18 2013, is amended to read as follows:

19 j. Establish and maintain a data collection and management  
 20 information system oriented to the needs of patients,  
 21 providers, the department, and other programs or facilities in  
 22 accordance with section 225C.6A. The system shall be used to  
 23 identify, collect, and analyze service outcome and performance  
 24 measures data in order to assess the effects of the services on  
 25 the persons utilizing the services. The administrator shall  
 26 annually submit to the commission information collected by the  
 27 department indicating the changes and trends in the disability  
 28 services system. The administrator shall make the outcome data  
 29 available to the public.

30 Sec. 22. Section 225C.6A, Code 2013, is amended to read as  
 31 follows:

32 **225C.6A Disability services system ~~redesign~~ central data**  
 33 **repository.**

34 1. The ~~commission~~ department shall do the following  
 35 relating to ~~redesign~~ of data concerning the disability services

1 system in the state:

2 ~~1. Identify sources of revenue to support statewide~~  
 3 ~~delivery of core disability services to eligible disability~~  
 4 ~~populations.~~

5 ~~2. Ensure there is a continuous improvement process for~~  
 6 ~~development and maintenance of the disability services system~~  
 7 ~~for adults and children. The process shall include but is not~~  
 8 ~~limited to data collection and reporting provisions.~~

9 ~~3. a. Plan, collect, and analyze data as necessary to~~  
 10 ~~issue cost estimates for serving additional populations and~~  
 11 ~~providing core disability services statewide. The department~~  
 12 ~~shall maintain compliance with applicable federal and state~~  
 13 ~~privacy laws to ensure the confidentiality and integrity of~~  
 14 ~~individually identifiable disability services data. The~~  
 15 ~~department shall regularly may periodically assess the status~~  
 16 ~~of the compliance in order to assure that data security is~~  
 17 ~~protected.~~

18 ~~b. In implementing~~ Implement a system central data  
 19 repository under this ~~subsection~~ section for collecting and  
 20 analyzing state, county and region, and private contractor  
 21 data, ~~the~~. The department shall establish a client identifier  
 22 for the individuals receiving services. ~~The client identifier~~  
 23 ~~shall be used in lieu of the individual's name or social~~  
 24 ~~security number. The client identifier shall consist of the~~  
 25 ~~last four digits of an individual's social security number,~~  
 26 ~~the first three letters of the individual's last name, the~~  
 27 ~~individual's date of birth, and the individual's gender in an~~  
 28 ~~order determined by the department.~~

29 c. Consult on an ongoing basis with regional administrators,  
 30 service providers, and other stakeholders in implementing the  
 31 central data repository and operations of the repository. The  
 32 consultation shall focus on minimizing the state and local  
 33 costs associated with operating the repository.

34 d. Engage with other state and local government and  
 35 nongovernmental entities operating the Iowa health information

1 network under chapter 135 and other data systems that maintain  
 2 information relating to individuals with information in the  
 3 central data repository in order to integrate data concerning  
 4 individuals.

5 ~~e.~~ 2. A county or region shall not be required to utilize a  
 6 uniform data operational or transactional system. However, the  
 7 system utilized shall have the capacity to exchange information  
 8 with the department, counties and regions, contractors, and  
 9 others involved with services to persons with a disability  
 10 who have authorized access to the central data repository.  
 11 The information exchanged shall be labeled consistently  
 12 and share the same definitions. Each county regional  
 13 administrator shall regularly report to the department annually  
 14 ~~on or before December 1, for the preceding fiscal year the~~  
 15 ~~following information for each individual served: demographic~~  
 16 ~~information, expenditure data, and data concerning the services~~  
 17 ~~and other support provided to each individual, as specified~~  
 18 ~~in administrative rule adopted by the commission by the~~  
 19 department.

20 ~~4. Work with county representatives and other qualified~~  
 21 ~~persons to develop an implementation plan for replacing the~~  
 22 ~~county of legal settlement approach to determining service~~  
 23 ~~system funding responsibilities with an approach based upon~~  
 24 ~~residency. The plan shall address a statewide standard for~~  
 25 ~~proof of residency, outline a plan for establishing a data~~  
 26 ~~system for identifying residency of eligible individuals,~~  
 27 ~~address residency issues for individuals who began residing in~~  
 28 ~~a county due to a court order or criminal sentence or to obtain~~  
 29 ~~services in that county, recommend an approach for contesting~~  
 30 ~~a residency determination, and address other implementation~~  
 31 ~~issues.~~

32 3. The outcome and performance measures applied to the  
 33 regional disability services system shall utilize measurement  
 34 domains. The department may identify other measurement domains  
 35 in consultation with system stakeholders to be utilized in

1 addition to the following initial set of measurement domains:

2 a. Access to services.

3 b. Life in the community.

4 c. Person-centeredness.

5 d. Health and wellness.

6 e. Quality of life and safety.

7 f. Family and natural supports.

8 4. a. The processes used for collecting outcome and  
9 performance measures data shall include but are not limited  
10 to direct surveys of the individuals and families receiving  
11 services and the providers of the services. The department  
12 shall involve a workgroup of persons who are knowledgeable  
13 about both the regional service system and survey techniques  
14 to implement and maintain the processes. The workgroup shall  
15 conduct an ongoing evaluation for the purpose of eliminating  
16 the collection of information that is not utilized. The  
17 surveys shall be conducted with a conflict-free approach in  
18 which someone other than a provider of services surveys an  
19 individual receiving the services.

20 b. The outcome and performance measures data shall encompass  
21 and provide a means to evaluate both the regional services and  
22 the services funded by the medical assistance program provided  
23 to the same service populations.

24 c. The department shall develop and implement an  
25 internet-based approach with graphical display of information  
26 to provide outcome and performance measures data to the public  
27 and those engaged with the regional service system.

28 d. The department shall include any significant costs for  
29 collecting and interpreting outcome and performance measures  
30 and other data in the department's operating budget.

31 Sec. 23. REPEAL. The amendment to section 225C.4,  
32 subsection 1, paragraph j, in 2012 Iowa Acts, chapter 1120,  
33 section 2, is repealed.

34 Sec. 24. REPEAL. The amendments to section 225C.6A, in 2012  
35 Iowa Acts, chapter 1120, sections 6, 7, and 95, are repealed.

DIVISION III

CHILDREN'S CABINET

Sec. 25. NEW SECTION. **242.1 Findings.**

The general assembly finds there is a need for a state-level children's cabinet to provide guidance, oversight, problem-solving, and long-term strategy development, and to foster collaboration among state and local efforts to build a comprehensive, coordinated system of care in order to promote the well-being of the children in this state. The system of care should address all domains of child physical, mental, intellectual, developmental, and social health and meet the particular needs of children for family-centered mental health and disability services and for other appropriate specialized services.

Sec. 26. NEW SECTION. **242.2 Children's cabinet established.**

There is established within the department of human services a children's cabinet.

1. The voting members of the children's cabinet shall consist of the following:

a. The director of the department of education or the director's designee.

b. The director of the department of human services or the director's designee. This member shall be chairperson of the cabinet.

c. The director of the department of inspections and appeals or the director's designee.

d. The director of the department of public health or the director's designee.

e. A parent of a child with a severe emotional disturbance or a disability who is the primary caregiver for that child, appointed by the governor.

f. A juvenile court judge or juvenile court officer appointed by the chief justice of the supreme court.

g. A community-based provider of child welfare, health, or juvenile justice services to children, appointed by the



1 director of human services.

2 *h.* A member of the early childhood Iowa state board or the  
3 early childhood stakeholders alliance, appointed by the state  
4 board.

5 *i.* A community stakeholder who is not affiliated with a  
6 provider of services, appointed by the governor.

7 *j.* A member of a child advocacy organization approved by the  
8 members of the children's cabinet.

9 *k.* A member of the Iowa chapter of the American academy  
10 of pediatrics who has expertise in pediatric health care and  
11 addressing the needs of children with special needs, designated  
12 by the Iowa chapter.

13 *l.* An area education agency staff member who works with  
14 early childhood services, appointed by the state's area  
15 education agency directors.

16 *m.* An area education agency staff member who works with  
17 children's mental health services, appointed by the state's  
18 area education agency directors.

19 *n.* Not more than three other members designated by  
20 the cabinet chairperson to ensure adequate representation  
21 of the persons and interests who may be affected by the  
22 recommendations made by the cabinet.

23 2. In addition to the voting members, there shall be four ex  
24 officio, nonvoting members of the children's cabinet. These  
25 members shall be two state representatives, one appointed by  
26 the speaker of the house of representatives and one by the  
27 minority leader of the house of representatives, and two state  
28 senators, one appointed by the majority leader of the senate  
29 and one by the minority leader of the senate.

30 3. *a.* The voting members, other than department directors  
31 and their designees, shall be appointed for four-year terms.  
32 The terms of such members begin on May 1 in the year of  
33 appointment and expire on April 30 in the year of expiration.

34 *b.* Vacancies shall be filled in the same manner as original  
35 appointments. A vacancy shall be filled for the unexpired

1 term.

2     *c.* The voting members shall receive actual and necessary  
3 expenses incurred in the performance of their duties and  
4 legislative members shall be compensated as provided in section  
5 2.32A.

6     4. Staffing services for the children's cabinet shall be  
7 provided by the department of human services.

8     Sec. 27. NEW SECTION.   **242.3 Duties.**

9     The children's cabinet shall perform the following duties  
10 in making recommendations to the agencies and organizations  
11 represented on the cabinet, the governor, the general assembly,  
12 and the judicial branch to address the needs of children and  
13 families in this state:

14     1. Recommend operating provisions for health homes for  
15 children implemented by the department of human services. The  
16 provisions shall include but are not limited to all of the  
17 following:

18     *a.* Identification of quality metrics.

19     *b.* Identification of performance criteria.

20     *c.* Provisions for monitoring the implementation of  
21 specialized health homes.

22     *d.* Identification of system of care principles and values  
23 based on the recommendations of the workgroup for redesign of  
24 publicly funded children's disability services implemented by  
25 the department of human services in accordance with 2011 Iowa  
26 Acts, chapter 121, section 1, subsection 4, paragraph "i".

27     2. Gather information and improve the understanding of  
28 policymakers and the public of how the various service systems  
29 intended to meet the needs of children and families operate at  
30 the local level.

31     3. Address areas of overlap, gaps, and conflict between  
32 service systems.

33     4. Support the evolution of service systems in implementing  
34 new services and enhancing existing services to address the  
35 needs of children and families through process improvement

1 methodologies.

2 5. Assist policymakers and service system users in  
3 understanding and effectively managing system costs.

4 6. Ensure services offered are evidence-based.

5 7. Issue guidelines to enable the services and other support  
6 which is provided by or under the control of state entities and  
7 delivered at the local level to have sufficient flexibility to  
8 engage local resources and meet unique needs of children and  
9 families.

10 8. Integrate efforts of policymakers and service providers  
11 to improve the well-being of community members in addition to  
12 children and families.

13 9. Implement strategies so that the children and families  
14 engaged with the service systems avoid the need for higher  
15 level services and other support.

16 10. Oversee the practices utilized by accountable care  
17 organizations and other care management entities operating on  
18 behalf of the state in the provision of government supported  
19 children's services and systems of care.

20 11. Identify and promote evidence-based practices that may  
21 be creatively applied in appropriate settings for prevention  
22 and early identification of social, emotional, behavioral, and  
23 developmental risk factors for children from birth through age  
24 eight.

25 12. Making periodic recommendations to the agencies  
26 and organizations represented on the cabinet. An agency or  
27 organization receiving such a recommendation shall respond  
28 in writing to the children's cabinet detailing how the  
29 recommendation was addressed. The response shall be submitted  
30 not later than sixty business days following the date of the  
31 receipt of the recommendation.

32 13. Submit a report annually by December 15 to the governor,  
33 general assembly, and supreme court providing findings and  
34 recommendations and issue other reports as deemed necessary by  
35 the cabinet.

1     Sec. 28. INITIAL TERMS. Notwithstanding section 242.2,  
 2 subsection 3, paragraph "a", as enacted by this division of  
 3 this Act, the appointing authorities for the members of the  
 4 children's cabinet created by this division of this Act who are  
 5 subject to terms of service shall be coordinated so that the  
 6 initial terms of approximately half of such members are two  
 7 years and the remainder are for four years and remain staggered  
 8 thereafter.

9

## DIVISION IV

10           CENTER FOR CHILD HEALTH INNOVATION AND EXCELLENCE

11     Sec. 29. Section 135.11, Code 2013, is amended by adding the  
 12 following new subsection:

13     NEW SUBSECTION. 32. Create and operate, subject to  
 14 appropriation of funding by the general assembly, a center for  
 15 child health excellence and innovation. The purpose of the  
 16 center is to provide a policy forum for efforts to improve  
 17 child health, including but not limited to improving health  
 18 quality, demonstrating better health outcomes, and reducing  
 19 long-term health care costs.

20     a. The center shall engage major providers of child health  
 21 services and associated groups, including but not limited to  
 22 representatives of the department, the medical assistance  
 23 program administrator, child health specialty clinics, the  
 24 association representing community health centers, the state  
 25 council created by the department for the department's project  
 26 LAUNCH initiative, staff of institutions of higher education  
 27 with expertise in pediatric health and child health care, the  
 28 prevention of disabilities policy council in conjunction with  
 29 the center for disabilities and development of the university  
 30 of Iowa's children's hospital, and others.

31     b. The center shall lead the review and analysis of public  
 32 policy efforts that are directed toward the purpose of the  
 33 center.

34     c. The center shall develop community-based initiatives  
 35 to promote healthy child development, leveraging medical

1 assistance program funding where possible. The initiatives  
2 of Iowa shall include but are not limited to the promotion of  
3 demonstration programs within the behavioral health managed  
4 care contract and the development of a grant application for  
5 federal and foundation funding opportunities that focus upon  
6 improving child health through innovation and the diffusion of  
7 innovation.

8     *d.* The center shall develop an early childhood mental health  
9 certification for professionals and others engaged in working  
10 with young children.

11     *e.* The center shall draw upon national and state  
12 expertise in the field of child health, including experts  
13 from Iowa's institutions of higher education, health provider  
14 organizations, and health policy and advocacy organizations.  
15 The center shall seek support from the Iowa research  
16 community in data report development and analysis of available  
17 information from Iowa child health data sources.

18     *f.* The center shall work with the departments of human  
19 services and public health and with the governor and members  
20 of the general assembly in child health public policy efforts  
21 such as providing medical assistance funding as necessary to  
22 expand the department's initiative to provide for adequate  
23 developmental surveillance and screening during a child's first  
24 five years to be available statewide and enabling child care  
25 resource and referral service agencies to facilitate provision  
26 of child mental health consultation for child care providers.

27     *g.* The center shall submit a report of its activities and  
28 policy recommendations to the general assembly by December 15  
29 annually.